

OCT 26 2005

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PTO/SB/21 (08-04)

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FORM

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Total Number of Pages in This Submission

3

Application Number

10/713,824

Filing Date

11/14/2003

First Named Inventor

NASH, Alan E.

Art Unit

1616

Examiner Name

Attorney Docket Number

3262/SOUS

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name  
ADAMS EVANS P.A.

Signature

Printed name

W. Thad Adams, III

Date

10/26/2005

Reg. No.

29,037

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PTO/SB/82 (04-05)

Approved for use through 11/30/2005. OMB 0651-0035

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<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/713,824
	Filing Date	11/14/2003
	First Named Inventor	Alan E. Nash
	Art Unit	1818
	Examiner Name	
	Attorney Docket Number	3282/30US

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

23638

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with  
Customer Number:

23638

OR

☐ Firm or  
Individual Name

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City

State

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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Alan E. Nash

Date

10-2-05

Telephone

(781) 344-3211

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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